

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SL	104861	1/10
O.L.P.E. CLASSIFIER	Unit	108231	2-3-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected
 - _____ Allowed
 - (Through numeral) _____ Canceled
 + _____ Restricted
 N _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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